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NOTICE OF PUBLIC MEETING – PHARMACY AND THERAPEUTICS COMMITTEE

AGENDA

Date of Posting: August 24, 2016

Date of Meeting: Thursday, September 22, 2016 at 1:00 PM

Name of Organization: The State of Nevada, Department of Health and Human Services, Division of Health Care Financing and Policy (DHCFP), Pharmacy and Therapeutics Committee.

Place of Meeting: Canyon Gate Country Club
2001 Canyon Gate Drive
Las Vegas, NV 89117
Phone: (702) 363-0303
Please check with staff to verify room location

A visual and audio feed will also be broadcast via the internet for those who are unable to attend in person. See below for details.

Webinar Event: <https://catamaranrx.webex.com/catamaranrx/onstage/g.php?MTID=e89a4188cfed0396b356f4b8c0dd78fe0>

Or

www.webex.com, select “Join”, enter Meeting Number 743 765 296, your name and email and then select, “Join”

Event Number: 743 765 296

Follow the instructions that appear on your screen to join the teleconference. Audio will be broadcast over the internet (VoIP).

Reasonable efforts will be made to assist and accommodate physically challenged persons desiring to attend the meeting. Please call Tanya Benitez at: 775-684-3722 or email Tanya.Benitez@dncfp.nv.gov in advance, but no later than two working days prior to the meeting, so that arrangements may be conveniently made.

Items may be taken out of order.

Items may be combined for consideration by the public body.

Items may be pulled or removed from the agenda at any time.

Public comment is limited to 5 minutes per individual, organization, or agency, but may be extended at the discretion of the Chairperson.

AGENDA

1. Call to Order and Roll Call

2. Public Comment

No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on the agenda as an item upon which action can be taken.

3. Administrative

A. **For Possible Action:** Review and Approve Meeting Minutes from March 24, 2016.

B. Status Update by DHCFP
1. Public Comment

4. Annual Review – Established Drug Classes

A. Analgesics: Opiate Agonists

1. Public Comment
2. Drug Class Review Presentation – OptumRx
3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
5. **For Possible Action:** Committee Discussion and Approval of Drugs for
Inclusion on the PDL

- B. Anti-infective Agents: Antivirals: Anti-hepatitis Agents: Polymerase Inhibitors/Combination
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- C. Anti-infective Agents: Antivirals: Anti-hepatitis Agents: Protease
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- D. Biologic Response Modifiers: Multiple Sclerosis Agents: Oral
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- E. Dermatological Agents: Topical Anti-infective: Topical Scabicides
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action

- a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- F. Electrolytic and Renal Agents: Phosphate Binding Agents
 1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- G. Gastrointestinal Agents: Antiemetics: Miscellaneous
 1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- H. Hormones and Hormone Modifiers: Antidiabetic Agents: Dipeptidyl Peptidase-4 Inhibitors
 1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups

4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- I. Hormones and Hormone Modifiers: Antidiabetic Agents: Incretin Mimetics
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- J. Hormones and Hormone Modifiers: Antidiabetic Agents: Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- K. Ophthalmic Agents: Antiglaucoma Agents: Ophthalmic Prostaglandins
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy

5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- L. Ophthalmic Agents: Ophthalmic Anti-infective/Anti-inflammatory Combinations: Ophthalmic Quinolones
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- M. Respiratory Agents: Respiratory Anti-inflammatory Agents: Respiratory Corticosteroids
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- N. Respiratory Agents: Respiratory Beta-Agonists: Long-Acting Respiratory Beta-Agonist
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

- O. Respiratory Agents: Respiratory Beta-Agonists: Short-Acting Respiratory Beta-Agonist
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

- P. Toxicology Agents: Substance Abuse Agents: Mixed Opiate Agonists/Antagonists
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

- 5. **Annual Review - Established Drug Classes Being Reviewed Due to the Release of New Drugs**
 - A. Analgesics: Opiate Agonists - Abuse Deterrent
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

- B. Biologic Response Modifiers: Multiple Sclerosis Agents: Injectable
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- C. Cardiovascular Agents: Antilipemics: Fibrin Acid Derivatives
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- D. Genitourinary Agents: Benign Prostatic Hyperplasia (BPH) Agents: 5-Alpha Reductase Inhibitors
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx
 - 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 - 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 - 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- E. Hormones and Hormone Modifiers: Antidiabetic Agents: Insulins (Vials, Pens and Inhaled)
 - 1. Public Comment
 - 2. Drug Class Review Presentation – OptumRx

3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- F. Neurological Agents: Anticonvulsants
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- G. Psychotropic Agents: ADHD Agents
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
 4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
 5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL
- H. Psychotropic Agents: Antipsychotics: Atypical Antipsychotics – Oral
1. Public Comment
 2. Drug Class Review Presentation – OptumRx
 3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups

4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

I. Respiratory Agents: Respiratory Antimuscarinics

1. Public Comment
2. Drug Class Review Presentation – OptumRx
3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

J. Respiratory Agents: Respiratory Long-Acting Antimuscarinic/Long-Acting Beta-Agonist Combinations

1. Public Comment
2. Drug Class Review Presentation – OptumRx
3. **For Possible Action:** Committee Discussion and Action
 - a. Approve Clinical/Therapeutic Equivalency of Agents in Class
 - b. Identify Exclusions/Exceptions for Certain Patient Groups
4. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
5. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

6. ANNUAL REVIEW – DRUG CLASSES WITHOUT PROPOSED CHANGES

1. Public Comment
2. Presentation of Recommendations for Preferred Drug List (PDL)
Inclusion by OptumRx and the Division of Health Care Financing and Policy
3. **For Possible Action:** Committee Discussion and Approval of Drugs for Inclusion on the PDL

A. Analgesics: Analgesic/Miscellaneous: Neuropathic Pain/Fibromyalgia Agents

- B. Analgesics: Analgesic/Miscellaneous: Tramadol and Related Drugs
- C. Analgesics: Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) - Oral
- D. Antihistamines:H1 blockers: Non-Sedating H1 Blockers
- E. Antiinfective Agents: Aminoglycosides: Inhaled Aminoglycosides
- F. Antiinfective Agents: Antivirals: Alpha Interferons
- G. Antiinfective Agents: Antivirals: Anti-hepatitis Agents: Ribavirins
- H. Antiinfective Agents: Antivirals: Anti-Herpetic Agents
- I. Antiinfective Agents: Antivirals: Influenza Agents
- J. Antiinfective Agents: Cephalosporins: Second-Generation Cephalosporins
- K. Antiinfective Agents: Cephalosporins: Third-Generation Cephalosporins
- L. Antiinfective Agents: Macrolides
- M. Antiinfective Agents: Quinolones: Quinolones - 2nd Generation
- N. Antiinfective Agents: Quinolones: Quinolones - 3rd Generation
- O. Autonomic Agents: Sympathomimetics: Self-Injectable Epinephrine
- P. Biologic Response Modifiers: Immunomodulators: Disease-Modifying Antirheumatic Agents
- Q. Biologic Response Modifiers: Multiple Sclerosis Agents: Specific Symptomatic Treatment
- R. Cardiovascular Agents: Antihypertensive Agents: Angiotensin II Receptor Antagonists
- S. Cardiovascular Agents: Antihypertensive Agents: Angiotensin-Converting Enzyme Inhibitors (ACE Inhibitors)
- T. Cardiovascular Agents: Antihypertensive Agents: Beta-Blockers
- U. Cardiovascular Agents: Antihypertensive Agents: Calcium-Channel Blockers
- V. Cardiovascular Agents: Antihypertensive Agents: Direct Renin Inhibitors
- W. Cardiovascular Agents: Antihypertensive Agents: Vasodilators:Inhaled
- X. Cardiovascular Agents: Antihypertensive Agents: Vasodilators: Oral
- Y. Cardiovascular Agents: Antilipemics: Bile Acid Sequestrants
- Z. Cardiovascular Agents: Antilipemics: Cholesterol Absorption Inhibitors
- AA. Cardiovascular Agents: Antilipemics: HMG-CoA Reductase Inhibitors (Statins):
- BB. Cardiovascular Agents: Antilipemics: Niacin Agents
- CC. Cardiovascular Agents: Antilipemics:Omega-3 Fatty Acids
- DD. Dermatological Agents: Antipsoriatic Agents: Topical Vitamin D Analogs

- EE. Dermatological Agents: Topical Analgesics
- FF. Dermatological Agents: Topical Antiinfectives: Acne Agents: Topical, Benzoyl Peroxide, Antibiotics and Combination Products
- GG. Dermatological Agents: Topical Antiinfectives: Impetigo Agents: Topical
- HH. Dermatological Agents: Topical Antiinfectives: Topical Antifungals (onychomycosis)
- II. Dermatological Agents: Topical Antiinfectives: Topical Antivirals
- JJ. Dermatological Agents: Topical Antiinflammatory Agents: Immunomodulators: Topical
- KK. Dermatological Agents: Topical Antineoplastics: Topical Retinoids
- LL. Gastrointestinal Agents: Antiemetics: Serotonin-receptor antagonists/Combo
- MM. Gastrointestinal Agents: Antiulcer Agents:H2 blockers
- NN. Gastrointestinal Agents: Antiulcer Agents: Proton Pump Inhibitors (PPIs)
- OO. Gastrointestinal Agents: Gastrointestinal Anti-inflammatory Agents
- PP. Gastrointestinal Agents: Gastrointestinal Enzymes
- QQ. Genitourinary Agents: Benign Prostatic Hyperplasia (BPH) Agents: Alpha-Blockers
- RR. Genitourinary Agents: Bladder Antispasmodics
- SS. Hematological Agents: Anticoagulants: Injectable
- TT. Hematological Agents: Anticoagulants: Oral
- UU. Hematological Agents: Erythropoiesis-Stimulating Agents
- VV. Hematological Agents: Platelet Inhibitors
- WW. Hormones and Hormone Modifiers: Androgens
- XX. Hormones and Hormone Modifiers:Antidiabetic Agents: Alpha-Glucosidase Inhibitors/Amylin analogs/Misc.
- YY. Hormones and Hormone Modifiers: Antidiabetic Agents: Biguanides
- ZZ. Hormones and Hormone Modifiers: Antidiabetic Agents: Meglitinides
- AAA. Hormones and Hormone Modifiers: Antidiabetic Agents: Sulfonylureas
- BBB. Hormones and Hormone Modifiers: Antidiabetic Agents: Thiazolidinediones
- CCC. Hormones and Hormone Modifiers: Pituitary Hormones: Growth hormone modifiers
- DDD. Hormones and Hormone Modifiers: Progestins for Cachexia
- EEE. Musculoskeletal Agents: Antigout Agents
- FFF. Musculoskeletal Agents: Bone Resorption Inhibitors: Bisphosphonates

GGG. Musculoskeletal Agents: Bone Resorption Inhibitors: Nasal Calcitonins
HHH. Musculoskeletal Agents: Restless Leg Syndrome Agents
III. Musculoskeletal Agents: Skeletal Muscle Relaxants
JJJ. Neurological Agents: Alzheimer's Agents
KKK. Neurological Agents: Anticonvulsants: Barbiturates
LLL. Neurological Agents: Anticonvulsants: Benzodiazepines
MMM. Neurological Agents: Anticonvulsants: Hydantoins
NNN. Neurological Agents: Anti-Migraine Agents: Serotonin-Receptor Agonists
OOO. Neurological Agents: Antiparkinsonian Agents: Non-ergot Dopamine Agonists
PPP. Ophthalmic Agents: Antiglaucoma Agents: Carbonic Anhydrase Inhibitors/Beta-Blockers
QQQ. Ophthalmic Agents: Ophthalmic Antiinfectives: Ophthalmic Macrolides
RRR. Ophthalmic Agents: Ophthalmic Antihistamines
SSS. Ophthalmic Agents: Ophthalmic Anti-inflammatory Agents: Ophthalmic Corticosteroids
TTT. Ophthalmic Agents: Ophthalmic Anti-inflammatory Agents: Ophthalmic Nonsteroidal Anti-inflammatory Drugs (NSAIDs)
UUU. Otic Agents: Otic Antiinfectives: Otic Quinolones
VVV. Psychotropic Agents: Antidepressants: Other
WWW. Psychotropic Agents: Antidepressants: Selective Serotonin Reuptake Inhibitors (SSRIs)
XXX. Psychotropic Agents: Anxiolytics, Sedatives, and Hypnotics
YYY. Psychotropic Agents: Psychostimulants: Narcolepsy Agents
ZZZ. Respiratory Agents: Nasal Antihistamines
AAAA. Respiratory Agents: Respiratory Antiinflammatory Agents: Leukotriene Receptor Antagonists
BBBB. Respiratory Agents: Respiratory Antiinflammatory Agents: Nasal Corticosteroids
CCCC. Respiratory Agents: Respiratory Antiinflammatory Agents: Phosphodiesterase Type 4 Inhibitors
DDDD. Respiratory Agents: Respiratory Corticosteroid/Long-Acting Beta-Agonist Combinations
EEEE. Toxicology Agents: Antidotes: Opiate Antagonists

7. Report by OptumRx on New Drugs to Market, New Generic Drugs to Market, and New Line Extensions

8. Closing Discussion

- A. Public comments on any subject.
- B. Date and location of the next meeting.

1. Discussion of the time of the next meeting.

C. Adjournment.

This notice and agenda have been posted at <http://dhcfp.nv.gov> and <http://notice.nv.gov>

Notice of this meeting will be available on or after the date of this notice at the DHCFP Web site www.dhcfp.nv.gov, Carson City Central office and Las Vegas DHCFP. The agenda posting of this meeting can be viewed at the following locations: Nevada State Library; Carson City Library; Churchill County Library; Las Vegas Library; Douglas County Library; Elko County Library; Lincoln County Library; Lyon County Library; Mineral County Library; Tonopah Public Library; Pershing County Library; Goldfield Public Library; Eureka Branch Library; Humboldt County Library; Lander County Library; Storey County Library; Washoe County Library; and White Pine County Library and may be reviewed during normal business hours.

If requested in writing, a copy of the meeting materials will be mailed to you. Requests and/or written comments may be sent to Ellen Felsing at the Division of Health Care Financing and Policy, 1100 E. William Street, Suite 101, Carson City, NV 89701, at least 3 days before the public hearing.

All persons that have requested in writing to receive the Public Hearings agenda have been duly notified by mail or e-mail.